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CONFIRMATION NO. 4847

SERIAL NUMBER 10/623,761	FILING OR 371(c) DATE 07/21/2003 RULE	CLASS 600	GROUP ART UNIT 3736	ATTORNEY DOCKET NO. 55990/8
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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *OKAY CDP*

This application is a CON of 09/860,199 05/17/2001 PAT 6,595,926  
which is a CIP of 09/657,027 09/07/2000 PAT 6,632,180

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\*  
\*\* 10/22/2003

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY FL	SHEETS DRAWING 0	TOTAL CLAIMS 4	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				

Verified and  
Acknowledged

Examiner's Signature

Initials

ADDRESS

31013

TITLE

Method for evaluating and treating hypertension

FILING FEE RECEIVED 482	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other <input type="checkbox"/> Credit
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